

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Tekmira Pharmaceuticals Corporation and
The University of British Columbia
Application No. : 09/875,805
Filed : June 5, 2001
Patent No : 6,858,224
Issued : February 22, 2005
For : METHOD OF PREVENTING AGGREGATION OF A LIPID:NUCLEIC ACID
COMPLEX

RECEIVED

MAR 15 2010

OFFICE OF PETITIONS

Docket No.: 480208.425C4

Date: March 9, 2010

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

CHANGE IN STATUS OF SMALL ENTITY

Commissioner for Patents:

We request that the status of the above-identified invention be changed to a large entity. It has come to our attention that sub-licensing of the above application may have resulted in the applicant's no longer qualifying for small entity status. Small entity status is hereby withdrawn. We hereby authorize the commissioner to charge our deposit account in the amount of \$645.00, which is the deficiency between the amount previously paid for the 3.5 year maintenance fee and the amount due. A late maintenance fee surcharge has also been included. The fees are submitted as noted below:

03/11/2010 MBANGURA 00000016 191098 6858224

01 FC:1559

515.00 DA

Best Available Copy

03/09/2010 15:08 FAX 1 206 682 6031

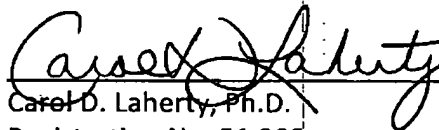
SEED IP LAW GROUP PLLC

003/004

FILING DATE OF ORIGINAL PAPER/FEE	TYPE OF FEE PAID	COLUMN A CURRENT FEE AMOUNT AS A LARGE ENTITY		COLUMN B AMOUNT ORIGINALLY PAID		DEFICIENCY (BASED ON CURRENT FEE AMOUNT)
8/22/2008	3.5 Maintenance Fee	\$980	-	\$465.00	=	\$515.00
	Surcharge					\$130.00
TOTAL FEE DEFICIENCY						\$645.00

Respectfully submitted,

SEED Intellectual Property Law Group PLLC

Carol D. Laherty, Ph.D.
Registration No. 51,909

701 Fifth Avenue, Suite 5400
Seattle, Washington 98104
Phone: (206) 622-4900
Fax: (206) 682-6031

F:\Pat\p7-11.doc

1575906-1

EXPRESS MAIL NO.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2010

Complete if Known

Application Number	09/875,805
Filing Date	June 5, 2001
First Named Inventor	Wheeler et al.
Examiner Name	Epps-Smith, Janet L

☐ Applicant claims small entity status. See 37 CFR 1.27

Art Unit	1635
----------	------

TOTAL AMOUNT OF PAYMENT	(\$) 645.00
-------------------------	--------------------

Attorney Docket No.	480208.425C4
---------------------	--------------

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: **19-1090** Deposit Account Name: **Seed IP Law Group PLLC**
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☐ Charge any additional fee(s) or underpayments ☒ Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Provisional	220	110	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
_____ -20 or HP = _____	X	_____	_____	Fee (\$)
HP = highest number of total claims paid for, if greater than 20.				Fee Paid (\$)

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ -3 or HP = _____	X	_____	_____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ -100 = _____	/50 = _____	_____ (round up to a whole number)	x _____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): **130.00**

Deficiency for 3.5 maintenance fee due to entity status change

Fees Paid (\$)

130.00**515.00**

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	51,909	Telephone	206-622-4900
Name (Print/Type)	Carol D. Laherty, Ph.D.	Date	3/9/2010		

Seed^{IP}

RECEIVED

MAR 15 2010

March 9, 2010

OFFICE OF PETITIONS

Carol D. Laherty, Ph.D.
Telephone: (206) 622-4900
CarolL@SeedIP.com

Facsimile Transmission

To: Director of USPTO / Attn: Maintenance Fee

Fax No.: 1 571 273 6500

Re: Change in Small Entity Status and Fee Transmittal Form

Seed IP Ref.: 480208.425C4 US Patent No. 6,858,224

No. of Pages: 4 (including this page)

If you do not receive all pages, please call Vanessa Knowles at (206) 622-4900 or fax our office.

address 701 Fifth Avenue
Suite 5400
Seattle, WA 98104
telephone 206.622.4900
facsimile 206.682.6031
website SeedIP.com

☐ Urgent☒ For Review☒ Please Confirm
Receipt☐ Please Reply
ASAP

Comments:

Please process the attached Change in Small Entity Status and Fee Transmittal Form.
Kindly confirm receipt of these documents via return fax at: 206.682.6031.

Thank you.

Transmission Information:

Date:

Time:

By:

CONFIDENTIALITY NOTICE:

The information contained in this facsimile message is legally privileged and/or confidential information intended only for the use of the addressee named above. If you are not the intended recipient, you are hereby notified that any use, dissemination, distribution, or copying of this facsimile or its content is strictly prohibited. If you have received this facsimile in error, please immediately notify us by telephone and return the original facsimile message to us by mail or destroy it without making a copy. Thank you.